

Time Travelers of W.N.Y.

Classic Car Club

Application for Membership

TIME TRAVELERS



OF W.N.Y., INC.

Date _____

Accepted Date _____

Sponsors Name _____

How long have you know Sponsor

Where did you hear about the club? _____

Mail To:

**Time Travelers of WNY
P. O. Box 307
Buffalo, N.Y. 14223**

Why do you want to join the Time Travelers Car Club?

Name _____ Spouse Name _____

Address _____

Date of Birth _____ Spouse _____

Anniversary _____

Children _____

Cars _____

Interest's _____

Work/Retired _____

Phone Number _____ Cell Number _____

Email Address _____